

APPROPRIATE & ACCURATE ASSISTANCE BY CAAs is KEY**EEs and CAAs, remember:**

- Operators on the CAA HELP Line (1-888-237-6248) are available Monday – Friday 8:00 a.m. to 5:30 p.m. to assist with questions regarding income calculations and family composition. When in doubt, contact them for assistance.
- **Never coach a family regarding what health or dental plans to select.**
- **Never charge a family for providing application assistance.**
- Refer back to the CAA Reference Manual, Pages 4-8, 4-9, and 4-10 for information regarding income that is counted and income that is not.
- **Never coach applicants to include some sources of income and exclude others, always refer to program policy regarding what income counts and what doesn't.**
- Incorrect calculations may cause a delay in the applicant being enrolled into the HFP/MCF Program and receiving care for their children.
- **Never advise beneficiaries to complete a new application instead of following through with their annual reviews for either Medi-Cal or Healthy Families. A new application is unnecessary, and may cause a break in health care coverage for their children. If it is determined that the children are eligible for the other program, they will be given an extra month of coverage while the two programs share information and determine eligibility.**
- **Never submit multiple applications for one family (split a family).**

The following sources of income must be reported:

- Earnings income, even if the applicant does not have a pay stub.
- Self-employment, Social Security, Veteran's Benefits, Railroad Retirement, State Disability Insurance, Worker's Compensation, Unemployment, Child Support/Alimony/Spousal Support Payments, Pensions/Retirement, Interest, Gifts/Gambling Winnings, and Insurance Annuity income.

Fraud and Complaint Reporting Process

Certified Applicant Assistants (CAA) continue to make a significant contribution towards the number of children enrolled in the Healthy Families and Medi-Cal for Families programs. Almost 65% of all applications received at Single Point of Entry are initiated by CAAs. Before becoming certified, a CAA Agreement was required to be signed in order to receive a CAA number. This agreement lists the requirements for proper conduct and prohibited activities by CAAs when assisting families to complete their application. It is extremely important that the CAA process be maintained at the highest level of integrity to ensure this process continues.

While performing CAA duties, a CAA may come upon situations that he or she feels are inappropriate or that are contrary to what is in the CAA Agreement. If you suspect misconduct or have a complaint about a person involved in the application process (e.g., CAA, EE, applicant, etc.), please call the CAA Technical Assistance Line at Richard Heath and Associates. The toll-free telephone number is 1-888-237-6248. These types of calls will be reviewed by the RHA call center staff to determine whether it is an issue they can resolve or if the situation or complaint needs to be forwarded to the appropriate State agency (i.e., Managed Risk Medical Insurance Board or Department of Health Services) for resolution.

**Attention All EEs/CAAs:
Call with your Email Address Today!**

Please call RHA at 1-888-237-6248 and provide us with the email address for each EE and linked CAA.

Providing the email address will allow RHA to notify all EEs and CAAs when:

1. There are program updates or policy changes.
2. The Reference Manual is revised and available for download.

If RHA does not have an email address, then CAAs may not be providing families with current information, which will affect the success of applications submitted.

CALL**1-888-237-6248****TODAY!**

RHA'S CAA HELP Line 1-888-237-6248

Monday - Friday 8:00 a.m. to 5:30 p.m.

Technical assistance for **CAAs** and **EES** with family composition and income calculations; request an ITP and/or A-level training; order enrollment and marketing materials; or provide change of address information.

EE Reimbursement and Information EDS Application Assistance Payment Unit 1-888-747-1222 press the star (*) key

Monday - Friday 9:00 a.m. to 6:00 p.m.

This line is for **EES ONLY** who want to obtain information about the reimbursement process or to inquire about the status of their reimbursement. EEs will need to provide their EE number and the CAA number for the person who provided the application assistance. For Fax inquiries please use the following number: 916-859-2388. For e-mail inquiries please contact the AAPU at: HFAAPU@eds.com.

HF/MCF General Information 1-888-747-1222

Monday - Friday 9:00 a.m. to 6:00 p.m.

Operators will provide assistance to **anyone** requesting *general* information for both HF/MCF, and referral information to local EEs. Individuals ordering up to four applications and handbooks may call this line.

Healthy Families Information Line 1-800-880-5305

Monday - Friday 8:00 a.m. to 8:00 p.m.

Saturday 8:00 a.m. to 5:00 p.m.

Technical assistance for **applicants** who need general information about the HF Program; answers to specific income and documentation questions when completing the application themselves; status information on their own completed and submitted application.

EEs may no longer use this line to check the status of an application on behalf of an applicant unless the applicant is present at the time the call is made.

Healthy Families Family Member Line 1-866-848-9166

Monday - Friday 8:00 a.m. to 8:00 p.m.

Saturday 8:00 a.m. to 5:00 p.m.

For families *currently* enrolled in the Healthy Families Program. Family must enter their family member number in order to access the system, otherwise they will be transferred to the 1-800-880-5305 line.

CA Kids

1-818-461-1400

For children under 19 that are not eligible for HFP/MCF, (200%-300% of the FPL).

Kaiser Permanente Capped in Five Counties



Kaiser Permanente reached its limit for Healthy Families Program subscribers that can be enrolled in the following counties on July 19, 2002:

- | | |
|----------|-------------|
| • Amador | • Placer |
| • Kings | • El Dorado |
| • Yolo | |

Free HF/MCF Marketing Materials Continue To Be Available

The HF/MCF marketing materials are available for EEs/CAAs to use in outreach efforts such as health fairs, enrollment events, or presentations to groups.

The multilingual materials are **FREE** of charge and include flyers, mini-posters, panel cards, tear-off pads, pens, and buttons. The bilingual (Spanish/English) fotonovelas are also available for use in outreach efforts. Fotonovelas tell a visual story through the use of photographs and easy-to-read captions.

EES/CAAs may order these materials through RHA at 1-888-237-6248. The customer service representatives can also provide suggestions on how to address your outreach needs. Quantities are limited to current inventory. Due to budget constraints, DHS has changed warehouses, so please allow four to five weeks for delivery of the marketing materials. EEs/CAAs may also download these materials through the Internet at the Healthy Families web site at www.healthyfamilies.ca.gov.

Additionally, EEs/CAAs may now order a campaign poster targeting the American Indian/Alaska Native (AI/AN) population for use in outreach efforts. The 16 x 20-inch poster was produced to help increase awareness among AI/AN families about the availability of free health, dental, and vision coverage for AI/AN children when acceptable documentation is provided. To order copies of the poster, please contact the California Department of Health Services (DHS) at (916) 657-2952 or fax your order to DHS at (916) 654-3653.

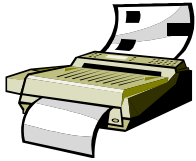
Health-e-App Assistance Process

Below are a few friendly application assistance tips below that will prevent unnecessary delays and help expedite the Health-e-App (HeA) eligibility process:

General:

After submitting a HeA and faxing the supporting documentation, DO NOT mail a copy of the application and/or documentation. If updated or further documentation is needed for eligibility purposes, the family will be contacted.

Faxed Documentation:



1. After the submission of the HeA, the supporting documentation should be faxed immediately.
2. Ensure that the specialized Documentation Fax Cover Sheet precedes the supporting documentation.
3. Submit the supporting documentation separately for each family you provide application assistance.
4. DO NOT fax documentation for more than one family under one Documentation Fax Cover Sheet.

Mailed Documentation:



If updated or additional documentation is requested after the case had been initially reviewed, and the documentation is mailed versus faxed, DO NOT include a copy of the Documentation Cover Sheet. Instead, the Family Member Number should be written on each piece of documentation.

Monthly Entity Payment Report Now Available On Line

If an Enrollment Entity (EE) is currently authorized to provide application assistance via Health-e-App, please follow the steps below in order to access the Monthly Entity Payment Report on-line:

1. Go to the HeA Welcome Page at <https://www.healthapp.net>
2. Select English (not available in Spanish at this time)
3. Select Enrollment Entity
4. Enter your assigned user name and password
5. On the Administrator Preferences Screen, select the View EE Payment Report option
6. On the Select Reporting Month and Year Screen, select a reporting period from the drop down menu

If an EE is not currently authorized to provide application assistance via HeA, please call the Help Desk at **1-866-861-3443** to set up an account for the EE to have access to the on-line Entity Payment Report.

Benefits to Utilizing the Entity Payment Report On-line:

- The EE won't have to wait for mail delivery, but can access the report on-line by the 3rd Monday of every month
- The EE can review prior months (4/02 – current) without having to dig through paperwork or files
- The EE can copy specific CAA information and paste it into a Word document for distribution



If you would like a more detailed version on how to access the Monthly Entity Payment Report on-line, or have questions regarding the report itself, you can send an e-mail to HFAAPU@eds.com or call 1 (888) 747-1222 and press (*) key during the menu options.

Recent Program Changes

- **Accelerated Enrollment in No-Cost Medi-Cal** – Effective July 1, 2002, most children who are screened at Single Point of Entry as being within the income guidelines for no-cost Medi-Cal, will be granted immediate coverage under the no-cost Medi-Cal Program. The Accelerated Enrollment (AE) to Medi-Cal will cover the entire month that the child's coverage begins (e.g., AE granted 8/15/02, Medi-Cal coverage for the entire month of August 2002) and continues until the County makes a determination of the child's eligibility for regular no-cost Medi-Cal. This new process will ensure children have access to medical coverage under the Medi-Cal Program while the County Social Services Department is making a complete determination of the child's eligibility under the Medi-Cal Program. Beneficiary Identification Cards (BIC) are sent directly to the applicant and should arrive in 7 to 10 days after AE is established.
- **Truing-up Premium Payments** – Effective July 1, 2002, the first month's premium payment for the Healthy Families Program (HFP) will be applied to the first full month after coverage has begun. This means that all premiums will be whole dollar amounts and the first month will no longer be pro-rated based on the number of days covered in the first month. This change will simplify the payment process and make the determination of the fourth free month, when 3 months of premiums are paid in advance, easier to determine.
- **New Premium Invoices** – The invoices for the HFP have changed. In the past, only those applicants who had a balance owed on their account were sent an invoice. To improve the communication and ensure timely notification of a change of address, the HFP now mails new invoices each month, even if there is a credit on the account. The new invoices are in five languages (i.e., English, Spanish, Korean, Vietnamese, and Chinese).
- **American Indian/Alaska Natives Premium Waiver** – Effective July 1, 2002, the HFP premiums will be waived for up to 2 months for American Indian/Alaska Native (AI/AN) children. If the applicant has indicated on the application (i.e., ethnic code 5a or 5b) that a child applying for HFP has AI/AN heritage on their application, the HFP premium will be waived for up to two months. This two-month period will allow families time to submit appropriate AI/AN verification for their child(ren) who are enrolled in the HFP. Co-payments are still required to receive services during this period and the health plans will not receive the AI/AN data until certification is granted. If the verification is not submitted within this 2-month period, the HFP will begin billing the families on a prospective basis.
- **Affidavit of Income** – Effective July 1, 2002, applicants may submit a signed statement (i.e., affidavit) when the person who receives the income can not provide documentation. An affidavit can only be used when other forms of acceptable documentation of income cannot be provided. When using an affidavit of income as documentation of income, certain criteria for the affidavit need to be met. These include:
 - The amount and frequency of income received;
 - A declaration that the individual cannot provide other documentation of his/her income at the time of the application to the program, and that the information is true and correct to the best of the individual's knowledge and belief;
 - An acknowledgement that the individual understands that the information contained in his/her affidavit may be subject to verification by the State, and;
 - The signature of the individual providing the affidavit of income and the date of the signature.

Please note: many persons who receive cash compensation, do not have deductions withheld by an employer, or do not receive a pay stub may in fact be self-employed. In these cases, the applicant should submit a profit and loss statement for the most recent 3 months, or a 1040 Federal Tax Form with Schedule C, to verify their earned income.

Recent Program Changes Continued

- **HFP Income Rules** – Effective July 1, 2002, the HFP uses the same household and income rules that are used to screen children for no-cost Medi-Cal at Single Point of Entry. These new rules will include all countable household members in separate budget units (i.e., family size) for each child being applied for but only the income of those person(s) who are financially responsible for that child will be counted (e.g., a parent is responsible for a child, a child with income is responsible for themselves, but a step-parent is not responsible for step-children and siblings are not responsible for other siblings, etc.). This change will provide greater assurance that children do not fall between programs and better aligns the HFP with the Medi-Cal for Families Program.
- **Health-E-App** – Health-e-App (HeA) is the first web-based application in the United States used to enroll uninsured children into public health insurance programs. One of the benefits of the HeA is that it provides the CAA and the applicant, a preliminary Healthy Families/No-Cost Medi-Cal eligibility screening in “real time”. The HeA also has the ability to keep track of the applications in progress, those submitted, and the status of the EE reimbursement fees. CAAs will be able to access information about the applications that they submitted, or that are still pending.
- **Healthy Families Family Member Line** – The Healthy Families Program now has a dedicated toll-free telephone line for HFP members. Customer Service Representatives are available to assist program members with billing inquiries, change of address requests, or to obtain other information about their account by calling 1-866-848-9166. The Customer Service Representatives can provide information in 11 different languages to applicants who call the Healthy Families toll free lines.
- **HFP to Medi-Cal Bridging Coverage** – Beginning with families who received their AER packages in July 2002 (with September 2002 anniversary month), whose children are determined to be below the HFP income, an additional two months of coverage under the HFP will be granted. This additional coverage is called the HFP Bridging coverage. During the HFP Bridging coverage, the application and all supporting documentation will be forwarded to the County Welfare Department (CWD) for a no-cost Medi-Cal determination, if the applicant provided authorization. If the applicant did not provide authorization, the HFP Bridging coverage will still be granted and the applicant will be sent a “Reconsider Medi-Cal” letter. If this form is returned, HFP will forward the application and all supporting documentation to the CWD. In order to continue the HFP Bridging coverage, the applicant must continue to pay their premiums. Disenrollment from the HFP will be effective two months after the end of the month of the subscriber’s anniversary date.
- **Electronic Fund Transfer (EFT)** – Effective July 1, 2002, families who pay their monthly premium by Electronic Funds Transfer (EFT) will receive a 25% discount on their monthly premium. This important change will allow families using EFT to receive the same benefit as those that pay for three months at one time and then get the fourth month free. The authorization form to begin the EFT process is on the back of the billing invoice sent to the applicant each month.
- **Sponsorship – (Any 12 consecutive month period)** – In the past, sponsorship for children could only be for the initial 12 consecutive months of coverage. Effective July 1, 2002, sponsorship can now be for any 12 consecutive month period. The same guidelines that applied before in regards to who can/cannot be a sponsor, how to sponsor a family, etc., still apply. Discounts for payments in advance (pay three get one month free) still do not apply to sponsors.
- **New MC 210 Mail-In Medi-Cal Application** – The Medi-Cal Program has revised the MC 210 Mail-In Medi-Cal application to allow the applicant to authorize their application to be forwarded to the HFP if a child has been determined to be above the no-cost Medi-Cal income level. Those MC 210 applications with a revision date of August 2001 contain this new authorization in Section 8. Families should be encouraged to sign this authorization to ensure their child(ren) have access to health coverage in either the no-cost Medi-Cal or the Healthy Families Program.

2002-03 State Budget

The 2002-03 State Budget resulted in a reduction in the Healthy Families/Medi-Cal for Families (HF/MCF) outreach budget from \$49.6 million to \$10.3 million. With that budget reduction, there was an elimination of all advertising, public relations, and marketing material development. In addition, the 55 community-based and school contracts were eliminated, (17 contracts funded through The California Endowment and The Packard Foundation are continuing). The remaining outreach activities are: Certified Application Assistant (CAA) training, payment of application assistance fees for successfully enrolled children and the 1-888-747-1222 outreach line for families to call to request a HF/MCF application or to ask questions. Families who request the assistance of a CAA will continue to be referred to Enrollment Entities.

In addition to reductions in the HF/MCF outreach funding, implementation of parental expansion was denied. Although the Governor is supportive of expanding Healthy Families coverage to include parents, the program expansion could not be made due to fiscal constraints and limited general fund resources.



The Department of Health Services (DHS) has completed the statewide implementation process of Health-e-App (HeA) to all Enrollment Entities (EEs) throughout California. The California Health and Human Services Agency (CHHSA) set the goal of having HeA available in every county by the time children return to school in the Fall 2002. This goal has been achieved by reaching out to 3,200 EEs, and EEs in 31 counties are now submitting applications via the HeA. HeA received 1,580 applications in July and 1,886 in August.

The HeA is currently only available to EEs and their linked Certified Application Assistants (CAAs). In order to use the HeA, the Authorized or Direct Dial Contact of the EE must call the HeA Help Desk at 1-866-861-3443 to register the EE organization and receive an EE password. Once the EE password is received, someone from the EE organization must then access the HeA to register each of the linked CAAs. The registration process will generate a temporary password for each CAA. Each CAA will use this temporary password to access the HeA for the first time. The first time the CAA logs onto the HeA, the CAA will be required to select a personal password and to complete an online training tutorial. Once the CAA has completed the training tutorial, he/she is ready to begin using the HeA to submit applications for the Healthy Families and Medi-Cal for Families Programs.

Currently, the only county that can receive the applications in electronic format is San Diego, the pilot county. Orange County has implemented the electronic interface and hopes to begin receiving its HeA applications electronically with a target date of November 11, 2002.

1-888-747-1222 Toll-Free Line Update

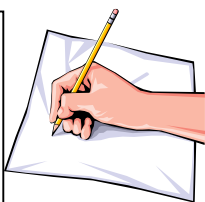
The Healthy Families/Medi-Cal for Families (HF/MCF) toll-free line (1-888-747-1222) has experienced a decrease in calls due to the elimination of advertising and public relations efforts. As a result, the call center hours of operation and staff were reduced, effective September 15, 2002. Now, operator assistance is available 9:00 a.m. to 6:00 p.m., Monday through Friday. During non-business hours, callers may leave messages that will be returned the next business day. The operators respond to callers' requests for HF/MCF applications and referrals to local EEs/CAAs.

EEs inquiring about reimbursements may continue to call 1-888-747-1222 and press the star (*) key. Operators will assist you from 9:00 a.m. to 6:00 p.m., Monday through Friday. EEs will need to provide their EE number and the CAA number for the person who provided the application assistance.

Additionally, EEs may fax inquiries to: 916-859-2388 or e-mail inquiries to AAPU at: HFAAPU@eds.com.

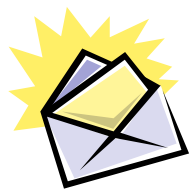
Unique is the Key!

Keep track of the Request Identification Numbers on every application assisted.



The Request Identification Number is the Bar Code located at the bottom of Page A1 of the Healthy Families/ Medi-Cal for Families Application.

The Request Identification Number is an individual and unique identifier. No two applications have the same Request Identification Number. This makes it easy to track and identify when an application has been reimbursed to your EE.



Request Identification Numbers for AER Packets are the first eight (8) letters of the applicant's last name.

Healthy Families creates a customized Annual Eligibility Review (AER) Packet for each family. Each year, a family will be asked to confirm their child's qualifications for the Healthy Families Program. Families should receive an AER packet by mail about 60 calendar days before the end of their **most recently enrolled child's** anniversary date in the Healthy Families Program. A family's eligibility review date will be 12 months from the date the last child was enrolled. In other words, each time another child from the same family is enrolled in the Program, all of the children re-qualify for another 12 months.

If a family has not received their customized AER Packet in a timely manner, encourage the family to call the Healthy Families toll-free line at 1-800-880-5305 to request another copy of their customized AER Packet.

Healthy Families has created unique Applications and AER Packets with the intent that tracking be easy and accurate. Enrollment Entities (EEs) and Certified Application Assistants (CAAs) are not to photocopy these forms. Each family should have one application and one Request Identification Number.

Reminder to all EEs and CAAs

Never:

- accept money or premium payments from applicants;
- mail the application for the applicant;
- coach on what information to include on the application regarding income, residency, immigration status and other eligibility rules;
- divulge to any unauthorized person, any information obtained while assisting individuals with their applications, or information obtained in conjunction with a referral from RHA;
- coach or recommend one plan/provider over another; or
- invite or influence an employee or their dependents to separate from employer-based group health coverage, or arrange for this to occur.

Always:

- act in a professional and courteous manner;
- wear a badge that identifies the person's name and CAA number, as well as the EE name and number. The badge can NOT identify the CAA as an employee of the State of California or of the Healthy Families or Medi-Cal for Families programs;
- comply with Managed Risk Medical Insurance Board and Department of Health Services fraud prevention policies and safeguards against fraudulent actions; and
- ensure Section 9 of the application is complete: family signature and date, CAA signature and date, EE number (5 digits) and CAA number (9 digits ending with 'A' or 'B'). Section 9 **MUST** be completed correctly, using an ink pen or typewriter, and contain original signatures to receive reimbursement.

Remember:

Please do not use the joint HFP/MCF application or the HFP Handbook as general handouts at community events or health fairs.

Instead, provide multilingual program flyers, panel cards, and fotonovelas. All of these materials are available to you at no cost.

Please contact RHA at 1-888-237-6248 to place your order.



Outreach, marketing and enrollment materials

ORDER FORM

For Your Family's Health

Order by phone. Call toll-free:

Certified Assistant HELP Line 1-888-237-6248

Order by mail: RHA HF/MCF Orders 590 West Locust Ave., Suite 103, Fresno, CA 93650
Fax your order to RHA: 559-447-7001

Please specify delivery address for requested materials

Date _____

Organization Name / Individual Name

Business Address

City _____ Zip Code _____

Delivery Address (if different) P.O. Boxes will not be accepted

City _____ Zip Code _____

Name of Contact Person

(_____) (_____)

Phone

Fax

ORGANIZATION CATEGORY

Please indicate the category your organization represents and provide requested information.

☐ EE # (required)

☐ CAA # (required)

☐ County Dept. Name _____

☐ School/District Name _____

☐ Provider Name _____

☐ HF/MC Contractor's Name _____

Marketing Material

Please allow 4 to 5 weeks for standard delivery at no cost.

No Special Delivery Requests.

Enrollment & Training

Please allow 4 to 5 working days for standard delivery of no cost.

SPECIAL DELIVERY REQUEST

You may request to have shipped at your cost by:

☐ UPS ☐ FedEx ☐ Other _____

Preferred Method:

☐ Overnight ☐ 2-Day ☐ Ground

Your Billing Authorization / Account # _____

White, 100% cotton T-Shirts with official color logo on front, (minimum order of 12).

Laminated paper or vinyl Banners

To purchase contact CeCee at (213) 480-0042.

Marketing Materials

PANEL CARD

4" x 9" Maximum 600. Order in quantities of 100

Armenian (Pub 34)

Cambodian (Pub 36)

Chinese (Pub 39)

English (Pub 33)

Farsi (Pub 40)

Hmong (Pub 41)

Korean (Pub 43)

Lao (Pub 44)

Russian (Pub 45)

Spanish (Pub 47)

Vietnamese (Pub 48)

READY-TO-COPY FLYER

8.5" x 11" (Customizable) Maximum 10

English/Spanish (Pub 1)

TEAR OFF DISPLAY UNIT

8.5" x 11" Display

Cardboard Display

(Pub 85) Max of 10

Eng./Span. Pad

(Pub 52) Max of 20

CUSTOMIZABLE MINI POSTERS

8.5" x 11" Maximum 50. Order in quantities of 25

Armenian (Pub 19)

Cambodian (Pub 21)

Chinese (Pub 23)

Farsi (Pub 24)

Hmong (Pub 25)

Korean (Pub 26)

Russian (Pub 28)

Spanish (Pub 29)

Vietnamese (Pub 32)

HEALTHY FAMILIES / MEDI-CAL PENS

Maximum 200. Order in quantities of 50.

Pens (Pub 54)

BILINGUAL SPAN / ENG FOTONOVELA

Maximum 500. Order in quantities of 100.

Fotonovela (Pub 5)

Marketing Material Cont'd.

BUTTONS

Healthy Families/Medi-Cal for Families buttons are available in limited quantities and languages. Please call for more information.

Enrollment & Training

Indicate requested quantities below

APPLICATIONS

Maximum 320. Order in quantities of 40

Armenian _____

Cambodian _____

Chinese _____

English _____

Farsi _____

Hmong _____

Korean _____

Lao _____

Russian _____

Spanish _____

Vietnamese _____

HANDBOOKS

Maximum 320. Order in quantities of 40

Armenian _____

Cambodian _____

Chinese _____

English _____

Farsi _____

Hmong _____

Korean _____

Lao _____

Russian _____

Spanish _____

Vietnamese _____

Marketing materials are available free of charge in limited quantities. Some materials may be discontinued without notice.